

## 6 v 6 Adult Coed Soccer Registration

First Name: \_\_\_\_\_

Last Name:	
Address:	
City/State/Zip:	
Home Phone:	
Cell Phone:	
E-mail:	
Understanding the risks of are necessarily associated with participand equipment, I assume full responsibility for myself and those all those persons, I fully release the City and the County of Darling behalf, from any liability arising from our participation in, and use the person responsible for myself and those listed above, I also full claims by others arising from our participation in, and use of, the and for the above listed persons, I consent to any medical treatment facility, including transportation and treatment at the nearest em. I have read and understand the terms and conditions of this mem.	and those persons listed above for all such risks; and, for myself and aton (County), their staff, employees, and volunteers acting on their of, the said recreational programs, facilities, and equipment. As lly indemnify and hold the City and County harmless from any and the said recreational programs, facilities and equipment. For myself ent necessitated by injuries sustained at any City recreational ergency care facility.
PRINT NAME:	_ FEE PAID:
SIGNED:	_ DATE:

	volunteer/Participant Release and Walver of Liability	
This Vo	olunteer/Participant Release and Waiver of Liability executed on the day of 20 releases the City of Hartsville and each of its own agents and emplo	_ by oyees
	Il responsibility and liability as pertaining to any event held on property designated as City Property. A	
proper relatio their o	eeer/Participant is any person or organization that provides services or attends and participates in event he ty designated as City Property. By signing this form, the undersigned understands that the scope of their inship with the City of Hartsville is limited to a volunteer/participant position and as such, will be responsible on insurance coverage in the event of personal injury or illness as a result of the volunteer/participant's so City of Hartsville or participation in the event.	ble for
1.	<u>Assumption of Risk:</u> The undersigned understands that they are solely responsible for their safety. The sprovided by the undersigned may include activities that deemed hazardous, including the potential for permanent paralysis and death. As a volunteer/participant, the undersigned expressly assumes risk of in harm from these activities, even if arising from the negligence of others, and hereby Releases the City of Hartsville and its agents and employees from all liability.	njury or
2.		pation in tsville ss, death

3. <u>Customary Terms and Conditions for Participation:</u> If any unusual hazard is observed during the presence or participation of the volunteer/participant, the undersigned will remove themselves from participation and bring such information to the immediate attention of the nearest City Official.

the event, or being present on the City property.

- 4. Photographic Release: The undersigned grants and conveys to the City of Hartsville and its agents and employees all right, title, and interests in any and all photographs, images, video, or audio recordings of them or their likeness or voice made by the City of Hartsville and its agents and employees in connection with the undersigned providing volunteer services to the City of Hartsville.
- 5. Indemnity and Hold Harmless: The undersigned, for themselves and on behalf of their heirs, assigns, personal representatives, and next of kin, hereby, to the maximum extent permitted by law, assume entire responsibility and liability and shall defend, indemnify, and hold harmless the City of Hartsville, including its governing bodies such as Authorities, Boards and Commissions, consultants, agents, sponsors, employees, volunteers, and owners of the premises used to conduct this activity and event with respect to any and all injuries and from all claims, demands, liabilities, losses, costs, arising out of any activity on this premises, whether arising from the negligence of the releases or personal conduct or otherwise.

I HAVE READ THIS VOLUNTEER/PARTICIPANT RELEASE AND WAIVER OF LIABILITY. By signing below, the undersigned (or parent/guardian with legal authority if under 18) expresses their understanding and intent to enter into this Volunteer/Participant Release and Waiver of Liability willingly and voluntarily. The undersigned signs freely and voluntarily.

Event:	Date of Event:
Printed Name:	Date of Birth:
Minor's Name:	Email:
Signature:	Emergency Phone Number:
Address:	City, State, Zip Code:

## Team Roster

1.	
2.	
3.	
4.	
5.	
IZ.	